



QUESTIONS FOR DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES COMMISSIONER NOMINEE

By: Nicole Dube, Principal Analyst

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES (DMHAS) COMMISSIONER ([CGS § 17A-451](#))

The commissioner establishes and enforces standards and policies for the treatment of people with psychiatric disabilities, substance use disorders, or both in public and private facilities; may investigate the serious injury or unexpected death of anyone who received treatment within one year of the occurrence; coordinates and cooperates with state agencies providing services to children with mental disorders and adults with psychiatric disabilities, substance use disorders, or both; and is responsible for developing and implementing state mental health and substance abuse plans.

QUESTIONS

1. The mission of DMHAS is "to improve the quality of life for Connecticut residents by providing an integrated network of comprehensive, effective and efficient mental health and addiction services that foster self-sufficiency, dignity and respect." How does DMHAS go about fulfilling this mission?
2. According to DMHAS, the concept of recovery is the guiding principle and operational framework for the system of care provided by the partnership of state and private agencies. Please explain the elements of this "recovery-oriented system of care" and the department's implementation of such a system in its programs and services. How is the current state budget situation affecting the ability of DMHAS to meet these goals?
3. You served on the Task Force to Study the Provision of Behavioral Health Services for Young Adults created by [PA 13-3](#). In its April 2014 final report, the task force noted the fragmentation of the state's behavioral health care system, particularly with respect to adolescents transitioning from pediatric

to adult-based services. It recommended that DMHAS and the Department of Children and Families (DCF) create a comprehensive co-agency program to address this issue. What are your thoughts on this? How does DMHAS currently work with DCF to transition these adolescents?

4. DMHAS recently implemented a Behavioral Health Home model under the Medicaid "home health" option program in collaboration with DCF and the Department of Social Services (DSS). Can you describe this model of care? How has the initiative worked so far for consumers and providers?
5. Describe the health disparities DMHAS is seeing. What are the characteristics of a culturally competent system of care? What steps is the agency taking to address these health disparities, particularly the development of culturally relevant programs?
6. Does DMHAS or its private providers have any problems finding sites for group homes? How does DMHAS work with communities in the siting process?
7. The majority of states have adopted outpatient commitment laws for people with severe mental illness who refuse or are unable to obtain needed treatment. What are your thoughts on this issue?
8. Please describe DMHAS' initiatives concerning alternatives to incarceration and reduction in recidivism.
9. DMHAS and DSS have placed certain community mental health services under the Medicaid Rehabilitation Option program. What are the benefits of doing so? How does the program integrate with the department's overarching concept of "recovery"? Do you anticipate adding additional services to the program?
10. What measures does DMHAS use to gauge its success or determine in what areas it most needs improvement?

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